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P10/30:00 (DE.O)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								19 83.3914				
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FOR	OR MANGER FRED MANGER EXTRA			EXTRA	RATE	FEE		RATE	FEE	1		
CASTE FEE (IN COR LASSE)	SE NE					<u> </u>	OR.		<u>-//(</u>	12		
DICH CLANS	SYAL CLAUS						OR		126	$\omega$		
DESCRIPTIONS OF CHRIS	12	$\mathcal{L}_{n}$	OR	<u> ء ن</u>	~ /							
MAINPLE DEPENDENT C	10		OR.	+50	had							
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CLA	ms as amen	(DED - P	ART II									
10-5-05			(Column 2)	(Consum 3)	SMALLE	YTTY	OR .	OTHER SWALL E		1		
	CLANS REMUSENC AFTER MENDMENT	, n	HOCHEST HOLEER BEVIOLESLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL PEE		STAR	ADDI- TIONAL FEE			
Total or one unpo		-	20	•	22_0		GR			]		
C Interpretation .		Minus ***	3	•	11 h		OR	z:		1		
E CHARLES MESSENTAIN	ON OF MARTINE C	PURR	OVER 62 CE	R 1,100	+3		<b></b>	••		]		
	•				TOTAL ADO'L FEE		OR	TOTAL ADDIL FEE		j		
7-1-10	(Cohero I)		(Cabuma 2)	(Column 3)						}		
	CLAMS REMARKO AFTER MEROMENT	P	HIGHEST HOMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ACCI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
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C properties .	2	1000	3	· W	ze_ •		OR.			4		
PRIST PRESENTATI	+9			+1		4						
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	COMES CLARS REMARKING AFTER WENDMENT	1.	(Column 2) HIGHEST HURBER REVIOUSLY PAID FOR	PRESENT EXTRA	STAGE	ADDI- TIDINAL FEE	•	RATE	ADDI- TIONAL FEE			
No Di Operation	78	-	20	.0.	×	•	] <sub>on</sub>	.50.	Ø	_		
Total or own unpo	2	1600	3	·Ø	x 5 •		] oa	-00D	Ø			
FIRST PRESENTAL	O O MATRIE	OEPE CEN	-	70 L.16(0)	••		] on			_		
					YOTAL ADOL FES		7 ∞	FOTAL ADOL FEE	\$79B	1		
• If the entry in cole •• If the Trightest Out •• If the Trightest Man	sthet Provincely I May Provincely I	Paid For M	THE SPACE	to less than 2.	ander 70°.	the source	iste box in	opuse 1,				
The Trighest Must This optionism of Informa-	ion is required	AN CHR	1. td. The ick	emelian is requ	ind to obtain or of		1 <b>2</b> -7 CH2 0	under which is to 5 to take 12 minu	the (and by the	0		

The property of the control of the control of 17 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to the (and by the SFTO to process) on application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, and extending the control of the cont

If you must explained in completing the torm, call 1-800-FTO-0199 and saled option is

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Applicat	H 6 8 0	Number 7
- 4	HOUD	2046

CLAIMS AS			(Column		(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS		27				[	RATE	FEE		RATE	FEE			
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00			
TOTAL CHARGEABLE CLAIMS			77 minus 20=		. 7			X\$ 9=	./	OR	X\$18=	126		
INDEPENDENT CLAIMS			2 minus 3 =		-0			X40=		OR	X80=			
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	10	OR	+270=			
• 16	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	836		
<del>///-</del>														
1919 CLAIMS AS AMENDED - PART II  (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY							ENTITY							
4		CLAIMS REMAINING AFTER		NUM	HEST MBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL		
ĒN		AMENDMENT			FOR				FEE		V040	FEE_		
NDN	Total	11	Minus	·O,	<del></del>	-		X\$ 9=		bп	X\$18=	/-		
<b>AMENDMENT</b>	Independent	· J	Minus	PENDEN	T CLAIM	-		X40=		OR	X80=	-//		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=			
								TOTAL ADDIT. FEE		OR	ADDIT. FEE			
		(Column 1)		(Colu	umn 2)	(Column 3								
NT B		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER TOUSLY D FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
OME	Total	•	Minus			=		X\$ 9=		OR	X\$18=			
AMENDMENT	Independent	•	Minus	•••		=		X40=		OR	X80=			
FIRST PRESENTATION OF MOETIFEE DEPENDENT OCHIN								+135=		1				
								+135=		OR	TOTA	<u>.                                    </u>		
	,						0-	ADDIT. FEE		JOR	ADDIT. FE	E <b>L</b>		
_		(Column 1)			umn 2) SHEST	(Column 3	3)		LADOI	7		ADDI-		
AMENDMENT C		REMAINING AFTER AMENDMENT		PRE	MBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL		
	Total	•	Minus	••		-		X\$ 9=		OF	X\$18=	Ì		
	Independent	•	Minus	•••		-		X40=		OF	X80=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105	1	1				
+135= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OF	`	ı.				
•	If the "Highest N	umber Previously	Paid For IN TI	HIS SPAC	E is less t :F is less t	han 20, enter 7 han 3. enter 73.		ADDIT. FEE	<u> </u>	OF	ADDIT. FE			
""If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														